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Bib Data Sheet

CONFIRMATION NO. 2745

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|---|---|--------------------------------------|---|--|--------------------------------|
| SERIAL NUMBER 09/807,164 | FILING DATE 07/06/2001 RULE | CLASS 600 | GROUP ART UNIT 3736 | ATTORNEY DOCKET NO. LZ-48PCT | |
| APPLICANTS Ludwig M. Auer, Homburg, AUSTRALIA; ** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/EP99/07540 10/07/1999 <i>Yes</i> ** FOREIGN APPLICATIONS ***** GERMANY 198 46 687.0 10/09/1998 <i>Yes</i> <div style="text-align: right;">** SMALL ENTITY **</div> | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>allowance</i> Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials | | STATE OR COUNTRY AUSTRALIA | SHEETS DRAWING | TOTAL CLAIMS 18 | INDEPENDENT CLAIMS 2 |
| ADDRESS Friedrich Kueffner 342 Madison Avenue Suite 1921 New York ,NY 10173 | | | | | |
| TITLE Device for carrying out medical interventions and a method for generating an image | | | | | |
| FILING FEE RECEIVED 625 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |